

IN THE UNITED STATES PATENT AND TRADEMARK OFFICERECEIVED
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MAR 14 2005

In re application of: MIRABEDINI et al.

Attorney Docket No.:

02-6352/LSI1P220

Application No.: 10/698,167

Examiner: PRENTY, Mark V.

Filed: October 31, 2003

Group: 2822

Title: CALCIUM DOPED POLYSILICON GATE
ELECTRODES

Confirmation No.: 9841

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being transmitted by facsimile to fax number 703-872-9306 to the U.S. Patent and Trademark Office on March 14, 2005.

Signed: Sue Funchess

Sue Funchess

AMENDMENT BMail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Examiner Prenty:

This Amendment is in response to the Final Office Action dated February 16, 2005. It is respectfully requested that the above-referenced patent application be reconsidered in light of the amendments and comments advanced herein below. Kindly amend the above-entitled application as set forth below:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 7 of this paper.

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FACSIMILE COVER SHEET

March 14, 2005

Receiver: Mark V. Prenty, Patent Examiner, Art Unit 2822
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Sender: Francis T. Kalinski II, Registration No. 44,177
Our Ref. No.: 02-6352/LSIIP220

Re: AMENDMENT B
U.S. Patent Application No. 10/698,167
Filed: October 31, 2003
Title: "Calcium Doped Polysilicon Gate Electrodes"

Pages Including Cover Sheet(s): 9

MESSAGE:**CONFIDENTIALITY NOTE**

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Sue Funchess

AMENDMENT B TRANSMITTAL

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.
The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	25	MINUS	27	0	x 25 =	x 50 = \$-0-
Independent Claims	2	MINUS	3	0	x 100 =	x 200 = \$-0-
Multiple Dependent Claim Present and Fee Not Previously Paid					\$180.00	\$360.00
Total					\$	\$-0-

- ☐ Applicant(s) hereby petition for a _____ month extension(s) of time to respond to the aforementioned Office Action.
- ☒ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 12-2252 (Order No. 02-6352).
- ☐ Enclosed is our Check No. _____ in the amount of \$_____ to cover the additional claim fee and/or extension of time fees.
- ☒ Please charge the required fees, or any additional fees required to facilitate filing the enclosed response, to Deposit Account No. 12-2252 (Order No. 02-6352).

Respectfully submitted,
BEYER WEAVER & THOMAS, LLP

Francis T. Kalinski II
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Oakland, CA 94612-0250

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